

**Application Guidance  
Competing New Proposals**

**EARLY POSTPARTUM DISCHARGE  
(CFDA # 93.110RT)**

**Priority:  
Early Discharge (DATA)**

**Spring 2000  
Application Due Date 5-1-2000**

**Office of Data and Information Management  
Maternal and Child Health Bureau  
Health Resources and Services Administration  
U.S. Public Health Service  
Department of Health and Human Services**

**NOTE: THIS DOCUMENT IS NOT A COMPLETE APPLICATION KIT. THE NECESSARY APPLICATION FORMS  
ARE ENCLOSED WITH THIS DOCUMENT AS A PART OF THE APPLICATION**

Maternal and Child Health Bureau

**DATE:**

**SUBJECT:** Intent to Apply for CDFA #93.110RT--Early Postpartum Discharge

Thank you for your interest in the above referenced grant program. If you intend to submit an application for the competition, please notify the Maternal and Child Health Bureau (MCHB), Division of Science, Education and Analysis by April 1, 2000 . You may notify your intent to apply in three ways:

Telephone: Alicia Scott-Wright  
(301) 443-0700

Electronic Mail: [ascott-wright@hrsa.dhhs.gov](mailto:ascott-wright@hrsa.dhhs.gov)

Mail: Maternal and Child Health Bureau  
Office of Data and Information Management  
5600 Fishers Lane, Room 18A-55  
Rockville, Maryland 20857

We appreciate your attention to this notice and thank you for your support.

Sincerely,

Michael Kogan  
Director  
Office of Data and Information Management

## **CHAPTER I INTRODUCTION**

### **1.1 Program Background and Objectives**

The mission of the Maternal and Child Health Bureau (MCHB) is to improve the health and well-being of all mothers and children. To achieve its mission, the Bureau places the highest priority on integrating personal health care and public and private health services to establish a community system of comprehensive services which is family-centered, culturally competent and integrated with education, social services, mental health and family support programs.

Nearly four million women give birth in the United States each year, the vast majority of them in hospitals, making childbirth the most frequent reason for hospital admission. Hospital length of stay following childbirth has progressively decreased during the past 25 years, initially in response to public pressure to de-medicalize childbirth and then later, increasingly, in response to cost-containment pressures. The steadily declining length of postpartum stay has raised concerns that many mothers and newborns may be discharged before all the necessary services have been provided. The rising level of concern among consumers, providers, researchers, and health care advocates has prompted state and federal legislation to regulate the lengths of postpartum stay. On September 26, 1996, the *Newborns' and Mothers' Health Protection Act of 1996* (HR 3666) was signed into federal law. The law states that group health plans and health insurance issuers may not limit benefits for hospital lengths of stay following childbirth for mothers or newborns to less than 48 hours following a vaginal delivery or 96 hours following a delivery by cesarean section.

The objectives for this grant are to build consensus on an optimal research agenda to guide practice and policy related to early postpartum discharge, to work with the Secretary's Advisory Committee to produce the reports called for in the Newborns' and Mothers' Health Protection Act of 1996, to conduct the research agenda specified by the Newborns' and Mothers' Health Protection Act of 1996.

### **1.2 Purpose and Program Goals**

As part of the VA-HUD and Independent Agencies Appropriations Act, 1996 (P.L. 104-204), Title VI (Newborns' and Mothers' Health Protection Act of 1996) requires that the Department of Health and Human Services to support and conduct studies on the factors affecting newborns and mothers.

Activities under this grant should address studies which answer the following questions/ goals:

- (1) What postnatal/postpartum services are actually being received by newborns and mothers?
- (2) What have been the effects of the Newborns' and Mothers' Health Protection Act?

(3) What are the unmet needs of mothers and newborns?

(4) What are the full range of costs incurred by mothers and their newborns for essential health services in the perinatal/postpartum period?

### **1.3 Maternal and Child Health Bureau Statement**

#### **1.3.0 Healthy People 2000 Language**

The Public Health Service (PHS) is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a PHS-led national activity for setting priority areas. Early Postpartum Discharge addresses issues related to the Healthy People 2000 Objective *14.1: Reduce the infant mortality rate to no more than 7 per 1,000 live births*; Objective *14.9: Increase to at least 75 percent the proportion of mothers who breastfeed their babies in the early postpartum period and to at least 50 percent the proportion who continue breastfeeding until their babies are 5 to 6 months old*. Potential applicants may obtain a copy of Healthy People 2000 (Full Report: Stock No. 017-001-00474-0) or Healthy People 2000 (Summary Report: Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office Washington, DC 20402-9325 (telephone: 202-783-3238).

#### **1.3.1 Pro-Children Act of 1994**

The Public Health Service strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. In addition, Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities (or in some cases, any portion of a facility) in which regular or routine education, library, day care, health care or early childhood development services are provided to children.

#### **1.3.2 Electronic Access**

Application guidance for MCHB programs are available on the MCHB Homepage via World Wide Web at: <http://www.os.dhhs.gov/hrsa/mchb/>. Click on the file format you desire either WordPerfect 6.1 or Adobe Acrobat (The Adobe Acrobat Reader also is available for download on the MCHB Homepage). If you have difficulty accessing the MCHB Homepage via the World Wide Web and need technical assistance, please contact Linda L. Schneider at (301) 443-0767 or "lschneider @hrsa.dhhs.gov".

### **1.3.3 Special Concerns**

HRSA's Maternal and Child Health Bureau places special emphasis on improving service delivery to women, children and youth from communities with limited access to comprehensive care. To assure access and cultural competence, projects will involve individuals from the populations to be served in the planning and implementation of the project. The Bureau's intent is to ensure that the broadest possible representation of culturally distinct and historically under-represented groups through programs and projects sponsored by the MCHB.

In keeping with the goals of advancing the development of human potential, strengthening the Nation's capacity to provide high quality education by broadening participation in MCHB programs of institutions that may have perspectives uniquely reflecting the Nation's cultural and linguistic diversity, and increasing opportunities for all Americans to participate in and benefit from Federal public health programs, HRSA will place a funding priority on projects from Historically Black Colleges and Universities (HBCU) or Hispanic Serving Institutions (HSI) in all categories and subcategories in this notice for which applications from academic institutions are encouraged. This is in conformity with the Federal Government's policies in support of White House Initiatives on Historically Black Colleges and Universities (Executive Order 12876) and Educational Excellence for Hispanic Americans (Executive Order 12900). An approved proposal from a HBCU or HSI will receive a 0.5 point favorable adjustment of the priority score in a 4 point range before funding decisions are made.

### **1.3.4 Evaluation Protocol**

A maternal and child health discretionary grant project, including any project awarded as part of the data program, is expected to incorporate a carefully designed protocol capable of documenting measurable progress toward achieving the stated goals. The protocol should be based on a rational relating the grant activities, project goals, and evaluation measures. The measurements of progress toward goals should focus on health outcome indicators, rather than on intermediate measures such as process or outputs. A project lacking a complete and well-conceived evaluation protocol will not be funded. (Applicable to all MCHB projects except hemophilia, as noted in SPRANS announcement.)

### **1.3.5 Criteria for Review**

The criteria which follow are used, as pertinent, to review and evaluate applications for

awards under all SPRANS grants and cooperative agreement project categories announced in this notice. Further guidance in this regard is supplied in application guidance materials, which may specify variations in these criteria.

- The extent to which the project will contribute to the advancement of Maternal and Child Health;
- The extent to which the project is responsible to policy concerns applicable to MCH grants and to program objectives, requirements, priorities and/or review criteria for specific project categories, as published in program announcements or guidance materials;
- The extent to which the estimated cost to the government of the project is reasonable, considering the anticipated results;
- The extent to which the project personnel are well qualified by training and/ or experience for their roles in the project and the applicant organization has adequate facilities and personnel;
- The extent to which, insofar as practicable, the proposed activities, if well executed, are capable of attaining project objectives;
- The strength of the project's plans for evaluation;
- The extent to which the application is responsible to the special concerns and programs priorities specified in the notice.

### **1.3.6 Criteria for Public Health System Reporting Requirements**

This program is subject to the Public Health System Reporting Requirements (approved under OMB No. 0937-0195). Under these requirements, the community-based nongovernmental applicant must prepare and submit a Public Health System Impact Statement(PHSIS). The PHSIS is intended to provide information to State and local health officials to keep them apprised of proposed health services grant applications submitted by community-based nongovernmental organizations within their jurisdictions.

Community-based nongovernmental applicants are required to submit the following information to the head of the appropriate State and local health agencies in the area(s) to be impacted no later than the Federal application receipt due date:

- (a) A copy of the face page of the application (SF 424);

- (b) A summary of the project (PHSIS), not to exceed one page, which provides:
- (1) A description of the population to be served;
  - (2) A summary of the services to be provided; and,
  - (3) A description of the coordination planned with the appropriate State and local health agencies.

### **1.3.7 SPRANS/CISS Data Reporting Requirements**

Section 1.3.7 does not apply to Ryan White and EMSC grant guidances.

"Grantees under the (SPRANS)(CISS) program are required to report annually to MCHB(under OMB clearance number 0915-0169) the number of persons served or trained(by race and ethnicity), evaluations performed, Healthy People 2000 Objectives addressed, and related information. Data forms for this purpose will be sent by project officers to all grantees during the first grant year, and annually thereafter."

\*(Note: Guidance may not include any data reporting requirements other than those approved by OMB. If you have any questions, please check with David Maglott, extension 3-2778.)

## **CHAPTER II APPLICATION AND REVIEW PROCESS**

### **2.1 Who Can Apply for Funds**

A funding priority will be given to institutions of higher learning with extensive experience in early discharge research, linkage with the Secretary's Advisory Committee on Infant Mortality, published research and recognition in the relevant field.

### **2.2 Project Particulars**

First Full Year \$250,000

Subsequent Full Year(s) \$150,000 up to no more than 3 years OR EQUIVALENTLY

First budget period: 07/01/2000-05/21/2001 - Amount of competition \$166,667

Second budget period: 06/01/2001-05/31/2002 - Amount of competition \$183,333

Third budget period: (may be prorated to include fewer months): 06/01/2002-05/31/2003 - Amount of competition \$150,000

Fourth budget period (may be prorated to include fewer months but no more than 4 months or may not be necessary): 06/01/2003-09/30/2003 - Amount of competition \$50,000

Estimated Number of Awards is 1 (one).

### 2.2.1 Due Date

The application deadline date is May 1, 2000. Applications shall be considered as meeting the deadline if they are 1) received by the HRSA Grant Application Center on or before the deadline date, or 2) are postmarked on or before the deadline date and received in time for orderly processing and submission to the review committee. (Applicants should request a legibly dated receipt from a commercial carrier or U.S. Postal Service postmark. Private metered postmarks shall not be acceptable as proof of timely mailing.) Late applications will be returned to the applicant.

### 2.2.2 Mailing Address

All applications should be mailed or delivered to:

HRSA Grants Application Center  
CFDA#93.110RT  
ATTN: Curtis Colston  
Grants Management Specialist  
1815 North Fort Myer Drive, Suite 300  
Arlington, Virginia 22209  
Telephone: 1-877-477-2123

Grant applications sent to any address other than that above are subject to being returned.

### 2.2.3 Official Application Kit

Federal Register notices and application guidance for MCHB programs are available on the World Wide Web via the Internet at address:

[http:// www.os.dhhs.gov/ hrsa/ mchb](http://www.os.dhhs.gov/hrsa/mchb)

Click on the file name you want to download to your computer. It will be saved as a self-extracting (Macintosh or) WordPerfect 5.1 file. To decompress the file once it is downloaded, type in the file name followed by a <return>. The file will expand to a WordPerfect 5.1 file. If you have difficulty accessing the MCHB Home Page via the Internet and need technical assistance, please contact Linda L. Schneider at 301-443-0767 or e-mail "lschneider@hrsa.dhhs.gov".

For applicants for the Early Postpartum Discharge (DATA) grants who are unable to access application materials electronically, a hard copy of the official grant application kit (Revised PHS form 5161-1, approved under OMB clearance number 0937-0189) must be obtained from the **HRSA Grants Application Center**. The Center may be contacted by: **TELEPHONE: 1-877-477-2123**. Completed applications should be

returned to: Grants Management Officer (CFDA # 93.110RT) HRSA Grants Application Center, 1815 North Fort Myer Drive, Suite 300, Arlington, Virginia 22209. The kit includes an acknowledgment card, PHS Form 3038, which must be completed and submitted with the application. HRSA Grants Application Center staff will detach half of the acknowledgment card and mail it to the applicant to confirm receipt of the application. If the card is not received within 15 days of submitting the application, applicants should contact the HRSA Grants Application Center to determine the status of the application.

#### **2.2.4 Application Assistance**

Applicants may obtain additional information regarding business, administrative, or fiscal issues related to the awarding of grants under this program by contacting:

Curtis Colston  
Grants Management Specialist  
Maternal and Child Health Bureau, HRSA  
Parklawn Building, Room 18-12  
5600 Fishers Lane  
Rockville, Maryland 20857  
Telephone: (301) 443-3288

Applicants may obtain additional information relating to technical and program issues from Program Officers in the Office of Data and Information Management (ODIM) by contacting:

Alicia Scott-Wright  
Parklawn Building, Room 18A-55  
5600 Fishers Lane  
Rockville, Maryland 20857  
Telephone: (301) 443-0700

#### **2.2.5 Review Process and Criteria**

Grant applications will be reviewed and rated by an Objective Review Committee (ORC) composed of Federal and non-Federal persons experienced in the research methodology and public policy. The ORC will evaluate the applications using the review criteria listed below. **Applicants are urged to address these criteria as directly as possible in the text of the program narrative.** Applications will be scored on a basis of 100 points with 100 being a perfect score. The weights of each criterion are also indicated below. Final determinations are expected in May, 1999.

Projects will start on July 1, 2000.

### **2000 REVIEW CRITERIA**

- |     |    |   |
|-----|----|---|
| 30% | 1. | Demonstration of capacity to coordinate and support a comprehensive research agenda on early postpartum discharge.  |
| 20% | 2. | Documentation of published research and established linkages with other researchers interested in early postpartum discharge.   |
| 25% | 3. | The degree to which linkage with the Secretary's Advisory Committee on Infant Mortality is demonstrated.  |
| 15% | 4. | The degree to which the proposed plan:<br><br>Addresses the issues identified in response to Review Criteria I;<br>Reflects the legislative and programmatic priorities of the Title VI, P.L. 104-204 (Newborns' and Mothers' Health Protection Act of 1996);<br>Contains goals and objectives that are clear, measurable, and time framed; and<br>Presents an evaluation strategy capable of documenting the achievement of project goals. |
| 10% | 5. | The degree to which the proposed budget clearly supports administrative and programmatic activities necessary to manage the program and accomplish proposed goals and activities.   |

## **CHAPTER III INSTRUCTIONS FOR COMPLETING THE APPLICATION**

### **3.1 Suggestions for Preparing the Application**

Reviewers will use only the information presented in your application to assess your response to the Review Criteria and evaluate your grant application. It is essential that your application and responses to the Review Criteria are complete and easy to understand.

### **3.2 Format and Style**

This section provides detailed instructions for formatting and organizing the grant application. A clearly written and easy-to-read grant proposal should be the goal of every applicant since the outcome of the review process depends on information provided in the application narrative. Therefore, MCHB urges all applicants to review their applications for the following:

Correct grammar, spelling, punctuation, and word usage

Consistency in style. Refer to a good style manual, such as *The Elements of Style* by Professors William Strunk, Jr. and E. B. White, *Words into Type*, *The Chicago Manual of Style*, or Government Printing Offices *A Manual of Style*.

Consistency of references (e.g., in this guidance document the Maternal and Child Health Bureau is called the Maternal and Child Health Bureau or MCHB.)

### **3.2.1 How to Organize the Application**

You should assemble the application in the order shown below:

- Table of contents for entire application with page numbers
- SF-424 Application for Federal Assistance
- Checklist included with PHS 5161-1 (Application Kit, page 23)
- SF 424A Budget Information--Non-Construction Programs
- Budget Justification
- Key Personnel form (See Attachment C)
- Federal assurances (SF 424B)
- Project Abstract (Attachment D)
- Project Narrative
- Appendices

### **3.2.2 How to Format the Application**

MCHB prefers that the format and style of each application substantially reflect the format and style used in this guidance. To promote readability and consistency in organization, MCHB has established specific conventions for the format of the project narrative, its project abstract, and appendices. Conventions for each are discussed below. Wherever conventions for the individual parts of the grant proposal differ, the parts are discussed separately. Otherwise, the specific convention applies to all parts of the grant proposal.

**Table of Contents**--A Table of Contents is required. Use the Table of Contents of this Guidance as a formatting and style guide.

**Page Limit and Spacing**-- (Note: If applications exceed the limits specified below, they are subject to being returned without review.)

**Project Abstract**--The Project Abstract may not exceed two pages.

Only single-spaced, one-sided pages are acceptable (See Attachment D).

**Project Narrative**--The project narrative may not exceed 40 pages. The page limit includes any referenced charts or figures but does not include the project abstract (separate page limit is given above), the budget justification, tables, or appendices. Only double-spaced, one-sided pages are acceptable.

-- **Appendices**--Appendices must not exceed 50 pages and must include all supporting documentation, such as (1) curricula vitae, (2) job descriptions, (3) letters of agreement and support, (4) evaluation tools, and (5) protocols. Job descriptions and curricula vitae must not exceed two pages each. Spacing will vary depending on the nature of the appendix, but only one-sided pages are acceptable.

**Typeface**--Use any easily readable typeface, such as Times New Roman, Courier, or New Century Schoolbook.

**Type Size**--Size of type must be at least 10-point; 12-point is preferable. Type density must be no more than 15 characters per inch. No more than six lines of type must be within a vertical inch. Figures, charts, legends, footnotes, etc., may be smaller or more dense than required above but must be readily legible.

### **Page Numbering**

-- **Project Abstract**--Consecutive, lowercase Roman numerals should appear centered at the bottom of the appropriate page. These should be a continuation of the numbering of the Table of Contents.

-- **Project Narrative**--Consecutive, Arabic numerals (beginning with 1) should appear centered at the bottom of each page. They should paginate all charts or figures appearing within the body of the text consecutively with the text.

-- **Application Tables**--Consecutive, Arabic numerals (beginning with 1) should appear centered at the bottom of each page. All information presented in tabular form should be paginated.

-- **Appendices**--Consecutive, Arabic numerals (beginning with 1) should appear centered at the bottom of each page.

**Margins**--The initial left and all right margins should be 1 inch. The left margin may change when using the decimal ranking illustrated and described below. Top and bottom margins should be 1-1/2 inches each.

**Decimal Subdivisions**--The material in the following box has been randomly excerpted to illustrate the ranking indentations and characteristics used in this document and to be used in your application. A description of the “ranking” follows the sample format below.

## **SAMPLE FORMAT**

### **CHAPTER III INSTRUCTIONS FOR COMPLETING THE APPLICATION**

#### **3.1 Suggestions for Preparing the Application**

Reviewers will use only the information presented in your application to assess your response to the Review Criteria and evaluate your grant application. It is essential that your application and responses to the Review Criteria are complete and easy to understand.

For suggestions about application writing, applicants are encouraged to review the document included in your application kit entitled....

#### **3.3.3 Complete, Responsive Application**

Applicants must submit applications that clearly have been developed for this application guidance. The application and its contents should follow the order of the application guidance. Each review criterion should be fully addressed and report the information requested in a substantive manner.

##### **3.3.3.1 Future Reporting Requirements**

A successful applicant under this notice will submit reports in accordance with the provisions of the general regulations that apply....

- FIRST RANK:** Chapter title and Roman numeral. In caps and bold. No indentation. One tab for the first sentence of each paragraph of text. Two returns between consecutive paragraphs.
- SECOND RANK:** Initial capital, Arabic decimal number bold, no indentation for heading. F-7 + tab for paragraphs. Two returns between consecutive paragraphs.
- THIRD RANK:** Initial capital, Arabic decimal number, bold. Heading indented F-7 x 2. Text indented F-7 x 2 + tab for lead sentences of paragraphs. Two returns between

consecutive paragraphs.

FOURTH RANK: Initial capital, Arabic decimal number, bold optional. Heading indented F-7 x 3. Text indented F-7 x 3 + tab for lead sentences of paragraphs. Two returns between consecutive paragraphs.

Note the subdivision of the document using a decimal system of numbering chapters, subdivisions and sub-subdivisions within the chapters. Note also the progressive indentation of each subdivision and sub-subdivision. The initial subheadings only are underlined. This visually distinguishes them from their subordinate subdivision. The latter are indented more than their superiors. This is carried out through the text of the document. This format will allow all users to locate desired text efficiently. In addition, it should assist reviewers in quickly locating text under particular subheadings to facilitate comparisons among competing applications.

**Headings**--Chapter headings in all parts of the grant application should be typed flush left in all caps, bold type. Subordinate ranks of subheadings are indented in accordance with their respective ranks.

- **Project Abstract**--Center the words “project abstract” in all caps, bold type, on the first line of the document (if using word-processing software) or 1-1/2 inches from the top of the paper (if typing).
- **Project Narrative**--Center the words “project narrative” and follow the instructions for the project abstract described above.
- **Appendices**--Identify appendices by labeling and titling each appendix and numbering each page of each appendix.

**Binding**--Fasten pages of grant application with one sturdy clip, placed at the top left corner. Do not use staples or bind pages in any other manner.

### 3.2.3 Copies Required

Applicants are required to submit one ink-signed original and two copies of the completed application.

## 3.3 Requirements

To be considered for a grant under the Early Postpartum Discharge (DATA) priority applicants must meet **all** of the requirements listed below. If an applicant fails to meet one of these requirements, the application may not be accepted for review and may be returned to the applicant.

Complete required application standard forms and provide budget justification.  
Document Public Health System Impact Statement (PHSIS) or project abstract.

Provide application in the required format and address all review criteria in a substantive manner.

Each of these requirements is discussed in detail below.

### **3.3.1 Overview of Application Form PHS 5161-1 and Related Program Concerns**

An official application is composed of 7 sections which are described more fully in the formal grant application form entitled PHS Grant Application Form PHS 5161-1 (Revised 7/92 or 5/96. Use of either version is acceptable). The applicant should be aware that page numbers in the two versions differ slightly.

The first section contains information about PHS policies and procedures.

The second section, SF-424, is the **Face Sheet** and requests basic information about the applicant and project.

The third section, SF-424A (non-construction) pertains to **budget** information.

The fourth section, SF-424B, concerns **Assurances** and must be signed by an authorized representative of the applicant organization.

The fifth section concerns **Certifications**. It sets forth certain requirements for grantees which have been legislatively implemented since the SF-424 assurances pages were last revised.

The sixth section concerns the **Program Narrative**.

The last section consists of a checklist which must be included with all applications.

The Catalog of Federal Assistance Number Code 93.110RT.

SF-424, Item 10, for Program Title, enter "Early Postpartum Discharge (DATA)"

SF-424, Item 13, enter the dates for the complete project period (not the budget

period), ie. July 1, 2000 - June 30, 2003

The following instructions should be used in completing SF-424A:

For each part of SF-424A, Section B, Budget Categories, it is required that applicants must submit on supplemental sheet(s) a justification for each individual budget category itemized (6a-j). Applicants typically identify the specific needs, but often fail to write a justification of those needs. These detailed budget justifications require the applicant to show specific references to the project plan related to how the requested dollar amount was developed. Applicants are not required to submit copies of contracts; however, personnel, scope of work, budgets, and budget justifications of contracts are required for grants management review.

**\*\*** As part of our efforts to streamline the grant process, a separate budget is required for each budget year requested. For example, if the applicant organization requests five years of grant support, five budget pages and justification are required for each year. **Proposals submitted without a budget and justification for each budget year requested may not be favorably considered for funding.** This provides the budget information needed for next year's Summary Progress Report.

The Key Personnel Form, Attachment C, may be used as a supplement to the Budget Narrative. Key personnel can be identified by name (if known), total percent of time and salary required under the grant, and if applicable, amounts provided by in-kind or by other sources of funds (including other Federal funds) to support the position. The budget justification for personnel addresses time commitment and skills required by the project plans. Similar detailed and itemized justifications must be provided for requested travel items, equipment, contractual services, supplies and other categories and for indirect costs. Please note that if indirect costs are requested, the applicant must submit a copy of the latest negotiated rate agreement. The indirect cost rate refers to the "Other Sponsored Program/Activities" rate and not the research rate.

### **3.3.2 Public Health System Impact Statement**

The project abstract may be used in lieu of the one-page PHSIS if the applicant is required to submit a PHSIS. See, 1.3.7.

### **3.3.3 Complete, Responsive Application**

Applicants must submit applications that clearly have been developed for this application guidance. The application and its contents should follow the order of the application guidance. Each review criterion should be fully addressed and report the information requested in a substantive manner.

### **3.3.3.1 Future Reporting Requirements**

A successful applicant under this notice will submit reports in accordance with the provisions of the general regulations that apply (45 CFR, Part 92.40 and Part 74, Subpart J, "Monitoring and Reporting of Program Performance"). Successful applicants will be required to provide an annual progress report. The progress report will be included in the continuation application each year. The progress report should include: (1) a brief summary of overall project accomplishments during the reporting period, including any barriers to progress that have been encountered and strategies/steps taken to overcome them; (2) progress on specific goals and objectives as outlined in this application and revised in consultation with the Federal project officer; (3) current staffing, including the roles and responsibilities of each staff and a discussion of any difficulties in hiring or retaining staff; (4) technical assistance needs; and (5) a description of linkages that have been established with other programs.

### **3.3.3.2 Preparing the Appendices**

Appendices should be brief and supplemental in nature. Do not include pamphlets or brochures in the application package unless they were specifically created for the project. Refer to the style and format section of this chapter for specific conventions to be followed in formatting appendices. Examples of useful items include the following:

**Rosters of Board or Executive Committee Members** -- Including indications of consumer representation.

**Copies of Written Documentation** -- Descriptions of relationships between the proposed program and affiliated departments, institutions, agencies, or individual providers, family members or consumer advocacy groups, and the responsibilities of each. Examples of documentation include: letters of support, understanding, or commitment; memoranda of agreement.

**Job Descriptions** -- Descriptions of responsibilities for all professional

and technical positions for which grant support is requested and any positions of significance to the program that will be supported by other sources. At a minimum, be sure to spell out the following:

- Administrative direction and to whom it is provided;
- Functional relationships (e.g. to whom does the individual report and how does the position fit within its organizational area in terms of training and service functions);
- Duties and scope of responsibilities;
- Minimum qualifications (e.g. the minimum requirements of education, training, and experience needed to do the job).
- Job descriptions reflect the functional requirements of each position, not the particular capabilities or qualifications of given individuals.
- Each job description should be separate and must not exceed two pages in length.

**Curricula Vitae** -- Include vitae for each incumbent in a position for which a job description is submitted. Each curriculum vitae must not exceed two pages. The Biographical Sketch included in Attachment E may be used for this purpose.

### **3.3.4 Checklist**

Refer to the “Checklist” on the next page for a complete listing of all components to be included in the application.

## **CHECKLIST FOR COMPETITIVE APPLICATION**

**FY 2000**

**SUBMIT 1 ORIGINAL, INK-SIGNED APPLICATION AND 2 SIGNED COPIES, ALL NUMBERED AND UNBOUND (FOR EASE OF COPYING). INCLUDE THE FOLLOWING:**

1.     \_\_\_ Letter Of Transmittal
2.     \_\_\_ Table Of Contents For Entire Application With Page Numbers

### **Budget Information**

3.     \_\_\_ SF 424 Application For Federal Assistance
4.     \_\_\_ Checklist Included With PHS 5161-1, (Page 23) *Application Kit*. Provide The Name, Address, And Telephone Number For Both The Individual Responsible For Day-To-Day Program Administration And The Finance Officer.
5.     \_\_\_ SF 424A Budget Information--Non-Construction Programs
6.     \_\_\_ Budget Justification  
(Includes The Narrative, Supplemental Sheets and Key Personnel Form,- ATTACHMENT C)

### **Federal Assurances**

7.     \_\_\_ Intergovernmental Review Under E.O. 12372, If Required By State
8.     \_\_\_ SF 424B Assurances--Non-Construction Programs
9.     \_\_\_ Department Certification (45 CFR Part 76)
10.    \_\_\_ Certification Regarding Drug-Free Workplace Requirements
11.    \_\_\_ Certification Regarding Debarment and Suspension
12.    \_\_\_ Lobbying Certification
13.    \_\_\_ Public Health System Impact Statement

### **Description Of Program**

14.    \_\_\_ Project Abstract, Maximum Of Two Pages (ATTACHMENT D)
15.    \_\_\_ Project Narrative, Maximum Of 40 Pages
16.    \_\_\_ Project Attachment, Maximum Of 50 Pages

## CHAPTER IV REQUIREMENTS FOR PROGRAM NARRATIVE

### 4.1 Project Abstract

This document may be used in lieu of the one-page Public Health System Impact Statement (PHSIS) if the applicant is required to submit a PHSIS. See, 1.3.7.

#### 4.1.1 Summary of Project Narrative

Applicant should prepare the **two page** abstract describing their proposed project according to the following outline (See Attachment D):

**A. Organizational Setting**

Identify the organizational name and project name and project director, and provide a brief description of the entity responsible for the project.

**B. Purpose**

Describe the primary purpose of the project. Explain what the project proposes to do.

**C. Problem**

Describe the issue related to the priority the project is designed to address.

**D. Goals and Objectives**

State the major goals and objectives for the project period.

**E. Methodology**

Briefly explain the project plan for achieving the goals and objectives.

**F. Evaluation**

Describe the techniques being used to track project activities and to measure: (1) State Title V outcomes, and (2) achievement of project goals and objectives.

#### 4.1.2 Text of Annotation

Prepare a three to five sentence description of your project that identifies the purpose and problems addressed, the goals and objectives of the project, the activities to attain these goals, and the materials developed.

#### **4.1.3 Key Words**

Key words are the terms under which your project will be listed in the subject index of the MCHB Abstract of Active Projects (see below). Select the most significant terms that describe your project, including the population served.

This Summary of Project Narrative (e.g. Project Abstract) will be published in the Maternal and Child Health Bureau's (MCHB) annual publication entitled Abstract of Active Projects. This publication, which includes summaries of all MCHB funded projects, is updated annually and is an important mechanism for dissemination of information about MCHB funded projects. The abstracts publication is widely distributed to MCHB grantees, Title V programs, academic institutions, and governmental agencies.

### **4.2. Proposal Description**

The following outline should be adhered to as a guide for development of the proposal narrative. This instruction supersedes the guidance on pp. 19-21 of the PHS 5161-1.

#### **4.2.1 Purpose of the Project**

In no more than four pages, briefly describe the overall purpose of the proposed project. The applicant should: (1) describe the problem with supporting evidence that clearly reflects the magnitude of the problem, (2) provide rationale and evidence supporting the proposed intervention/demonstration, and (3) describe the anticipated benefit in terms of the “Purpose and Program Goals”, Section 1.2.

#### **4.2.2 Organizational Experience and Capacity**

Demonstrate evidence of organizational experience and capability to coordinate and support planning, implementation and evaluation of a comprehensive approach.

#### **4.2.3 Administration and Organization**

Describe the administrative and organizational structure within which the project will function, including relationships with other community, State, regional or national entities, institutions or agencies relevant to the program. Charts outlining these

relationships must be included. Copies of any formal agreements defining these relationships should be included in the appendices.

#### **4.2.4 Available Resources**

Include a brief description of the available resources (staff, funds, equipment, facilities, etc.) to carry out the program.

#### **4.2.5 Needs Assessment**

Describe needs assessment activities that have already been initiated and/or completed to: determine the need for the proposed activities; determine unmet needs, barriers and special problems to be overcome; and identify current successful strategies to meet identified needs, including the identification and use of existing community, State, regional and national strengths and resources - fiscal, programmatic and formal/informal leadership - to implement the proposed project.

#### **4.2.6 Collaboration and Coordination:**

Describe the proposed project's existing and planned methods of collaboration and coordination with other relevant agencies, organizations, SPRANS grantees, key public and private providers, family members, consumer groups, insurers, and other partnerships relevant to the proposed project.

#### **4.2.7 Goals and Objectives:**

Identify project goals and objectives which are responsive to the goals of this priority and the perceived need(s) and strengths/resources of the target population. Objectives should be specific, time-oriented, measurable, and respond to the identified problem(s). Describe the activities to be utilized in accomplishing each objective. The applicant is reminded that goals and objectives are expected to be outcome oriented. A major criteria for review is the extent to which the proposal's purpose, intervention and anticipated outcomes are clearly defined, outcome oriented and specific to this priority.

#### **4.2.8 Required Resources:**

Describe briefly what resources, in addition to those existing, are needed to accomplish the stated goals and objectives, i.e., what is requested through project support and why. Provide assurances that grant funds will be used only for the purposes specified in the application and that necessary fiscal control and accounting procedures will be established.

#### **4.2.9 Project Methodology:**

Describe, as appropriate, the methodology by which the project will be carried out. Include a description of the overall model for addressing goals, objectives, coordination of activities, etc. Place the Project Activities Time Allocation Table (Attachment F) and the Personnel Allocation Chart (Attachment G) in the methodology section.

#### **4.2.10 Plan for Evaluation:**

Describe the plan to evaluate the impact of the project and the plan to monitor and evaluate the efficiency and effectiveness of the proposed program. Evaluation methodology should be specific and related to the stated goals and objectives.

The protocol should be based on a clear rationale relating the identified needs of the target population to grant activities, project goals, and evaluation measures. A project lacking a complete and well-conceived evaluation protocol as part of the planned activities will not be funded. Projects incorporating the expertise of a professional evaluation specialist (either on staff or as a consultant) at the design stage of the project methodology, in addition to the evaluation stage, will be given priority consideration.

**ATTACHMENT A**

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**SUPPLEMENT TO SECTION F of FORM 424A  
KEY PERSONNEL**

NAME AND  
POSITION TITLE

FRINGE BENEFIT

(Rate\_\_\_\_\_)

**MATERNAL AND CHILD HEALTH IMPROVEMENT PROJECTS ABSTRACT**

Project Title \_\_\_\_\_  
Project Number \_\_\_\_\_  
Project Director \_\_\_\_\_ Phone (    ) \_\_\_\_\_  
Organization Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Contact Person \_\_\_\_\_ Phone (    ) \_\_\_\_\_  
Fax (    ) \_\_\_\_\_  
E-mail/World Wide Web Address \_\_\_\_\_  
Project Period: \_\_\_\_ Years  
From: \_\_\_\_\_ to \_\_\_\_\_

**MCHIP Abstract (con't)**

## Biographical Sketch

Give the following information for all professional personnel contributing to the project beginning with the Project Director.  
(DO NOT EXCEED 2 PAGES ON ANY INDIVIDUAL)

Name (Last, first, middle initial)	Title	Birth Date (Mo. Day Year)
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Education (begin with baccalaureate or other initial professional education and include postdoctoral training)			
Institution and Location	Degree	Year Completed	Field of Study

HONORS

MAJOR PROFESSIONAL INTEREST(S)

RESEARCH AND PROFESSIONAL EXPERIENCE List in reverse chronological order previous employment and experience. List in reverse chronological order in representative publications.)

**Continuation Page for  
Biographical Sketch**

<b>Name (Last, first, middle initial)</b>	<b>Social Security Number</b>
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**PROJECT ACTIVITIES TIME ALLOCATION TABLE**

Project Title: \_\_\_\_\_

Project Director: \_\_\_\_\_

Budget Period: 10/1/98 to 9/30/99

State: \_\_\_\_\_

Objectives and Approaches (same as Personnel Allocation Chart)	Start Date	Completion Date	Tracking/Evaluation Methods

**ATTACHMENT G**

**PERSONNEL ALLOCATION CHART**

Project Title: \_\_\_\_\_ Project  
 Director: \_\_\_\_\_  
 Budget Period: 10/1/98 to 9/30/99 Project Year: 1 State: \_\_\_\_\_

Objectives and Approaches	Staff by Title and Consultants in Persons Days							

